

## 2017 Quabbin Fishing Area Season Pass Application



PLEASE PRINT CLEARLY

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City/Town: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Gender: ☐ Male ☐ Female **Date of Birth** (mm/dd/yyyy): \_\_\_\_/\_\_\_\_/\_\_\_\_

Phone Number: (\_\_\_\_) \_\_\_\_\_ Email (optional): \_\_\_\_\_

Boat Registration #'s: Boat 1: \_\_\_\_\_ Boat 2: \_\_\_\_\_

**NOTE: Application must be presented in person when purchasing pass.**

**Emergency Contact Name (if we are unable to speak with you):**

\_\_\_\_\_  
**Contact Phone Number (to speak to you while you are on the water):**

(\_\_\_\_) \_\_\_\_\_

**I understand and will comply with the Rules and Regulations as stated in the Fishing Guide. I will be off the water at or before posted time. If I allow someone to borrow my boat, I understand that they are responsible as well.**

**Signature and Date** \_\_\_\_\_

**Category (check one):**

- ☐ **Regular** - \$50
- ☐ **Senior** (age 62+) - \$25 (*Positive proof of age required with application*)
- ☐ **Handicapped** - \$25 (*Handicapped placard # required*)
- ☐ **Replacement Fee** - \$10

**Conditions:**

- ❖ Passes will be issued at the Quabbin Visitor Center beginning March 26, 2017 and at the three Boat Launch Areas once they open for the season.
- ❖ Passes are valid for parking and boat launching ONLY at Quabbin Reservoir Fishing Areas.
- ❖ Passes are non-transferable. The person named on the pass must be present when it is being used.
- ❖ A \$10 Replacement Fee will be charged for lost passes.

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- ❖ You may be asked for a picture ID when presenting the pass.
- ❖ Normal check-in procedures at Boat Launch Areas apply.
- ❖ Season Pass fee is non-refundable.
- ❖ All passes expire on the last day of the Quabbin Fishing Season in 2017.
- ❖ Please call the Quabbin Visitor Center at (413) 323-7221 with any questions.

<b><u>FOR OFFICIAL USE</u></b>	
Date: _____ Pass #: _____ (Add H or S to pass #, if applicable)	<div style="border: 1px solid black; padding: 2px;"><u>Location:</u> <input type="checkbox"/> VC <input type="checkbox"/> Admin <input type="checkbox"/> BLA#1 <input type="checkbox"/> BLA#2 <input type="checkbox"/> BLA#3</div>
<input type="checkbox"/> Cash <input type="checkbox"/> Check or Money Order (#: _____)	
➤ <b>Make checks payable to Commonwealth of MA</b>	
➤ If Senior, verify that year of birth is 1955 or earlier: <input type="checkbox"/> Yes	
➤ Handicapped placard # (if applicable): _____	
<div style="border: 1px solid black; padding: 2px;"><u>Initials:</u>  </div>	